PTC/SB/01 (08-03)
Approved for use through 07/31/2006. OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Ider The Paperwork Reduction Act of 1995, no persons are required to respond to a collection of infurnation unless it contains a valid OMB control number.

Onder the 1-aperwork respection racker races, no particular	Attorney Doc	ket Number	04-0126-HOWE				
DECLARATION FOR UTILITY OR	First Named	Inventor	HOWE, Harold W.				
DESIGN		COM	PLETE IF KNOWN				
PATENT APPLICATION	A						
(37 CFR 1.63)	Application N	umber					
Declaration Declaration	Filing Date			,			
Submitted OR Submitted after Initial With Initial Filing (surcharge	Art Unit						
Filing (37 CFR 1.16 (e))	Examiner Na	ıme					
required)							
I hereby declare that:							
•							
Each inventor's residence, mailing address, and citizens				·			
I believe the inventor(s) named below to be the original a which a patent is sought on the invention entitled:	and first inventor(s)	of the subjec	t matter which is cli	aimed and for			
APPARATUS AND METHOD FOR RESO	NANT_VIRRAT	CORY MIX	ang				
APPARATUS AND METHOD FOR RESO	יאאויו-יוטואאי	OICI WIII	(III C				
(Tit)	le of the Invention)						
the specification of which	·						
is attached hereto							
OR							
was filed on (MM/DD/YYYY)	as Unit	ed States App	plication Number o	PCT International			
		DAGGOG [(if applicable).			
	amended on (MM/D	L					
I hereby state that I have reviewed and understand the camended by any amendment specifically referred to about	contents of the abov	e identified s	pecification, includi	ng the claims, as			
I acknowledge the duty to disclose information which	is material to pate	ntability as o	lefined in 37 CFR	1.56, including for			
continuation-in-part applications, material information wand the national or PCT international filing date of the co	inion became availa ontinuation-in-part a	pplication.	the filling date of t	the billot application			
Lhereby claim foreign priority benefits under 35 U.S.C	C. 119(a)-(d) or (f).	or 365(b) of	any foreign applic	cation(s) for patent.			
inventor's or plant breeder's rights certificate(s) or 365	(a) of any PCT inte	rnational app	ilication which desi	gnated at least one			
country other than the United States of America, listed I application for patent, inventor's or plant breeder's right	below and nave also s certificate(s), or al	nv PCT interr	national application	having a filing date			
before that of the application on which priority is claimed	i.	,					
	gn Filing Date	Prior		ed Copy Attached?			
Number(s) Country (MN	M/DD/YYYY)	Not Cla	imed Ye				
		<u> </u>	╣				
		<u></u>] [
	1	Г	7 1				
			i [=				
			DI PTO/SPIOSP off	ached barate			
Additional foreign application numbers are listed on	a supplemental pn	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Custome	r Number:	2	6357		OR	_	Correst	oondence address below
	<u> </u>								
Name									
Address									
Address									
City				State					ZIP
City				Otato					
Country		Telephon				Fax			
Country		relepiton				1			
I hereby declare that all statem	asia mada har	nin of my	own know	ledge	are I	lue and th	at all	stateme	ents made on information
and helief are helieved to be	true, and fur	ther that	these stat	ement	S WE	ere made	with t	the kno	wiedge that willful false
statements and the like so made false statements may jeopardize	de are punishal	ble by fine	or impriso	onmen	t, or	both, unde	er 18 t	J.S.C.	1001 and that such willful
Taise statements may jeopardize	e the validity of	THE APPRO	ation of al	iy pace	111113	3deo mere			
NAME OF SOLE OR FIRST IN	VENTOR:		Ар	etition	has			s unsigr	ned inventor
Given Name						Family No	me		
(first and middle [if any]) Hai	rold W.	_				Or OBITIO		lowe	
Inventor's Date									
Signature	11/1/1/								Jan. 26,2004
Residence: City	State			Cour	ntry			Citize	nship
Butte	МТ			USA		USA			
Mailing Address									
1901 South Franklin Street									•
Cily	State				ZIF	•			Country
Bulle	MT				597	'01			USA
NAME OF SECOND INVENTO	R·				l a	petition ha	as bee	n filed i	for this unsigned inventor
Given Name						Family Na	ıme		
(C.) (A)(. C)	emiah J.	-				or Surnam	ne W	arrine	er
Inventor's	1.1	11							Date /
Signature	~// C <u>~</u>	12							1/26/04
Residence: City	State			Country			Citize	nship	
Butte	MT USA USA								
Mailing Address 1901 South Franklin Street									
City	State				ZIP			Coun	try
Butte	мт				5970)1		USA	-
Addilional inventors or a legal re	presentative are be	ing named o	n the 1	supp'em	ental	sheel(s) PTO	/SB/02A	or OZLR	attached hereto.

[Page 2 of 2]

PTO/SB/02A (08-03)

Approved for use through 08/31/2003. OMB 0851-0332

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

ADDITIONAL INVENTOR(S)

DECLARATION	Supplemental Sheet Page 1 of 1				
Name of Additional Joint Inventor, if any:		A petition	has been filed for this	s unsigned in	ventor
Given Name (first and middle (if any)		Family Name of	Sumame		
Aaron M.		Cook			
Inventor's CLMCAL					21/2004
Butte Residence: City	MT State	USA	untry	USA Citizenship	,
1901 South Franklin Streel Mailing Address					
Mailing Address				 	
Butte	МТ		59701	USA	
Name of Additional Joint Inventor, if any:	State	A petition	Zip has been filed for thi	Country s unsigned in	
Given Name (first and middle (if any)	Family Name or Surname				
Scott L.	Coguill				
Inventor's Signature South Coquell		Date /- Z	6-04		
Butte Residence: City	MT State		USA Country		USA Citizenship
1901 South Franklin Streel Maillng Address	***				
Mailing Address					
Butle City	MT State		59701 Zip	USA Country	
Name of Additional Joint Inventor, if any:		☐ A petition	n has been filed for thi	is unsigned in	ventar
Given Name (first and middle (if any)			Family Name o	r Surname	
Lawrence C.		Farrar			
Inventor's Signature		Date 2	6 TAN 2	004	
Butte Residence: City	MT State		USA Country		USA Citizenship
1901 South Franklin Street Mailing Address					
Mailing Address				- 1	
Bulte City	MT State		59701 Zip	USA Country	
				- bear all has the	a public which is to file

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (08-03) Approved for use through 11/30/2005, OMB 0651-0035 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Under the Paperwork Reduction Act of 1995, no persons are red	quired to respond to a collection of info	mmalicut uniess it dispiays a valid OMB control number.
	Application Number	
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Filing Date	
	First Named Inventor	HOWE, Harold W.
	Title	APPARATUS AND WETHOD FOR RESONANT-MERATORY MYER
	Art Unit	
	Examiner Name	
	Attorney Docket Number	04-0126-HOWE

I hereby appoint:					
X Practitioners at Customer Number:	26357				
OR					
Practitioner(s) named below:					
Name			Registration N	umber	
			 		
as my/our attorney(s) or agent(s) to prose	cute the application identified:	above, and to tran	sact all business in	the United States Patent and	
Trademark Office connected therewith.	odo ino approduom dominos				
Please recognize or change the correspon		identified applical	lion to:		
The above-mentioned Customer	Number				
OR			}		
The address associated with Cu	stomer Number:				
OR					
Firm or Individual Name Robe	rt M. Hunter				
Address Robe	rt M. Hunter PLLC				
Address P.O. I	3ox 2709				
City Kamı	iela	State	HI	ZIP 96743	
Country USA					
	85-4194	Fax	808-885-411	<u> 14</u>	
Tam the: X Applicant/Inventor. Assignee of record of the entire in the control of the entire in the entire in the control of	nterest, See 37 CFR 3.71.	ne)			
Statement under 37 CFR 3.73(b	- Andrewson and a second a second and a second and a second and a second and a second a second and a second a second and a		D	* ***	
	SIGNATURE of Applicant	t or Assignee of	Record		
Name Harold W. Howe					
Signature //			T-lb		
	wy		Telephone		
NOTE: Signatures of all the inventors or assign- forms if more than one signature is required, se	ees of record of the entire interest of bulow*.	or their representati	ve(s) are required, Sub	bmit multiple	
Total of 5 forms are					
This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a bunefit by the public which is to file (and by the					

this education of information is required by 37 UPM 1.31 and 1.33. The information's required to determ or related a benefit by the public which is to the 13nd by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 80x 1450. According to 120 NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

POWER OF ATTORNEY

and

PTO/SB/81 (06-03)

HOWE, Harold W

Approved for use through 11/30/2005, OMB 0551-0035 U.S. Palent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

Application Number

First Named Inventor

Filing Date

Title

APPARATUS AND METHOD FOR RESUNANT, VIBRATORY MIXING CORRESPONDENCE ADDRESS Art Unit INDICATION FORM Examiner Name **Attorney Docket Number** 04-0126-HOWE t hereby appoint: 26357 Practitioners at Customer Number. Practitioner(s) named below: Registration Number Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Palent and Trademark Office connected therewith. Please recognize or change the correspondence address for the above-identified application to: X The above-mentioned Customer Number: OR The address associated with Customer Number: Firm or Robert M. Hunter Individual Name Address Robert M. Hunter PLLC Address P.O. Box 2709 State Zip | 96743 City Kamuela HI Country USA Telephone Fax 808-885-4194 808-885-4114 am the: Х Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Farrar Signature Telephone 2004 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below". *Total of _5 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Palent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (06-03) Approved for use through 11/30/2005. OMB 0551-0035 U.S. Patent and Tracemark Office, U.S. DEPARTMENT OF COMMERCE

POWER OF ATTORNEY					
and					
CORRESPONDENCE ADDRESS					
INDICATION FORM					

unuer the maperwork meduction Action 1995, the persons are re-	quireo to respond to a collection of info	imation unless it displays a valid UNB control number.
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	
	Filing Date	
	First Named Inventor	HOWE, Harold W.
	Title	APPARATUS AND METHOD FOR RESONANT-VIBRATORY MIXING
	Art Unit	
	Examiner Name	
	Attorney Docket Number	04-0126-HOWE

I hereby appoint:							
V	Number: 263	57					
X Practitioners at Customer	Number: 200						
OR							
Practitioner(s) named belo	ow:				_		
	Name			Registration N	lumber		
	 						
as my/our attorney(s) or agent(s Trademark Office connected the) to prosecute the rewith.	application identified	above, and to tra	nsact all business i	n the United States Patent and		
Please recognize or change the	correspondence a	ddress for the above	-identified applica	ation to:			
The above-mentioned	Customer Number	Ţ					
OR							
The address associate	ed with Customer i	Number:)			
	, a will oddiolio						
OR Firm or	5						
Individual Name RODER IVI. HUNTER							
Address		Hunter PLLC					
Address	P.O. Box 2	709	State	· [][Zip 96743		
City	Kamuela		State	HI	^{∠ip} 96743		
Country	USA	04	Fax	808-885-41	14		
Telephone	808-885-41	94	[187]	800-003-41	14		
i am the:							
Applicaniumventor							
Assignee of record of the Statement under 37 Ch	ne entire interest. R 3.73(b) is encic	See 37 CFR 3.71. sed. (Form PTO/SB/	96)				
	SIGI	NATURE of Applicar	nt or Assignee of	f Record			
Name Sout L. Poqu	ıill <i>at</i>						
	riell						
Date 1-26-04/				Telephone			
NOTE: Signatures of all the inventors forms if more than one signature is re	s or assignees of rec equired, see below*.	ord of the entire interest	or their representat	ive(s) are required. Su	ibmit multiple		
	orms are submitte	d.					
This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the							

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the profice which is to the (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (06-03) Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are re	quired to respond to a collection of Info	rmation unless it displays a valid OMB control number.
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	
	Filing Date	
	First Named Inventor	HOWE, Harold W.
	Title	APPARATUS AND METHOD FOR RESONANT-VIBRATGRY WIKING
	Art Unit	
	Examiner Name	
	Attorney Docket Number	04-0126-HOWE

I hereby appoint:				<u>-</u>				
X Practitions	ers at Customer Number:	26357						
OR		<u></u>						
Practitions	Practitioner(s) named below:							
	Name Registration Number							
<u> </u>				····				
	auta) as acontic) to acoca	vula the application identified	ahove and to tra	nsact all business	in the United States Patent and			
Trademark Office	ey(s) or agent(s) to proset a connected therewith.	vic the application recitied	GOOTE, and to tid					
Glasso	o or change the correspon	dence address for the above	identified anolics	ation to:				
I			.acrimica applici					
X The ab	ove-mentioned Customer	Number:						
OR								
The at	Idress associated with Cu	stomer Number:						
OR								
Firm Indi	vidual Name Robe	t M. Hunter						
Address		t M. Hunter PLLC						
Address		3ox 2709						
City	Kamu	ela	State	<u> HI</u>	^{Zip} 96743			
Country	USA			000 005 1	144			
Telephon	e 808-8	85-4194	Fax	808-885-41	114			
I am the: X Applica	ant/Inventor.							
Assign Statem	ee of record of the entire i rent under 37 CFR 3.73(b)	nterest. See 37 CFR 3.71. is enclosed. (Form PTO/SB/	96)					
SIGNATURE of Applicant or Assignee of Record								
Name Je	remiah J. Warrine							
Signature	1100							
Date	1/26/04			Telephone				
NOTE: Signatures forms if more than	of all the Inventors or assigne one signature is required, se	es of record of the entire interest below*.	or their represental	tive(s) are required. S	Submit multiple			
X *Total of	5 forms are	submitted.						
This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the								

Inis collection or information is required by 37 CFK 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including galhering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/81 (06-03) Approved for use through 11/30/2005. OMB 0651-0035

p.9

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are requir

POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number	
Filing Date	
First Named Inventor	HOWE, Harold W.
Title	APPARATUS AND METHOD FOR RESONANT-VIBRATORY MIXING
Art Unit	
Examiner Name	
Attorney Docket Number	04-0126-HOWE

I hereby appoint:			i.			
X Practitioners at Customer	Number: 26357					
OR			j			
Practitioner(s) named bek	ow:					
	Name		Registration Num	ber		
		<u> </u>				
as my/our attorney(s) or agent(s Trademark Office connected the) to prosecute the application identification.	ed above, and to transa	ct all business in th	e United States Patent and		
	correspondence address for the abo	ve-identified application	to:			
THE 200VC-MEMIORCO	Customer Number:					
OR						
The address associate	ad with Customer Number:					
OR						
Firm or Individual Name	Robert M. Hunter					
Address	Robert M. Hunter PLLC) ! 				
Address	P.O. Box 2709	State		Zip 96743		
City	Kamuela	State -	<u>''</u>	^{Zip} 96743		
Country	USA 808-885-4194	Fax 8	08-885-4114			
Lam the:	000-000-4194	1,2, 10	00-003-4114			
X Applicant/Inventor.						
	he entire interest. See 37 CFR 3.71. FR 3.73(b) is enclosed. (Form PTO/5	SB/96)				
SIGNATURE of Applicant or Assignee of Record						
Name Aaron M. Co	ok					
Signature Children Communication of the Communicati						
Date 126 200	4		Telephone			
NOTE: Signatures of all the inventors forms if more than one signature is re	s or assignees of record of the entire inter equired, see bolow".	est or their representative(s	a) are required. Submi	I multiple		
	forms are submitted.					
This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the						

This collection or information is required by 37 CFR 1.31 and 1.33, The information is required to dotted in the control of the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to lake 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.